

Job End Report

Job:

Job Title: _____ Employer: _____

Job Start Date: _____ Job End Date: _____

Job Duties (if changed since start date): _____

Work hours (include any changes): _____

Reason for job end:

☐ Quit for a better job ☐ Quit—symptoms ☐ Quit for another reason ☐ Terminated

Consumer's perspective regarding job end: _____

Staff comments regarding job end: _____

Employer comments: _____

Type of support provided: _____

Type of supervision at work site: _____

Does person wish to look for another job/what kind? _____

Client's preferences regarding disclosure on next job: _____

Staff Signature

Date